

GSA 2004 INTERNATIONAL PRODUCTS AND SERVICES EXPO MAY 11-13, 2004

ORLANDO CONVENTION CENTER

REGISTRATION FORM FOR VISITORS AND NON EXHIBITING VENDORS

- This registration is for Non Government visitors and Companies who do not have an exhibit booth at this show.
- Registration entitles you to admission to the receptions, lunches, trade show and all sessions.
- No soliciting will be allowed.
- Please type or print clearly, we cannot be responsible for the misspelling of illegibly written names.
- Badges will be available for on site pick up.

Company Information:

Company: __

Address:						
City:	State:		Zip:			
Phone:	Fax:		Em	ail:		
Contact Name: (All information will be forwarded to this person)						
Name(s) will appear on the badge	es as indicated belo	w.				
1	2					
Rules Governing Visitors: 1. Management: U.S. General Services Adminis equipment and to be educated in the most recentage 2. Registration of Visitors: MC² shall have the appropriate badge while in attendance. 3. Soliciting Business: Soliciting business, into be permitted. Violation of these rules will result 4. Activities: Visitors will not schedule, foster or 5. Interpretation and Amendments: MC² reserpurposes. 6. A maximum of 2 visitors from each compand. No refunds or exchanges. I understand and will comply with all rules.	t products and services ava sole control over admission rviews and demonstrations in expulsion from the Expo. conduct outside activities, ves the right to interpret or a ny will be allowed.	ilable. No visitor will engag policy at all times. All perso of materials, including distr which would take qualified a mend these regulations as	e in any activities inco ons visiting the Expo, To ibution of literature or attendees from the expo is deemed proper to en	nsistent with this p raining Rooms and t samples, canvassin o. nsure the success o	urpose. the Exhibit area will be requir ng or distribution of advertisir f the exhibit and further its ec	ed to wear the og matter will not ducational
Fees: Visitor (s)x \$500.00 = Tot						
MasterCard ☐ Visa ☐ Ameri					Date:	
Cardholder's Name: Please Print						
Cardholder's Signature:						
Address:	(City:		State:	_ Zip:	

Return completed form with payment to:

MC-2/GSA Expo, 500 Interstate West Parkway Lithia Springs, GA 30122

Phone: 800-343-2171 Fax: 770-739-4406